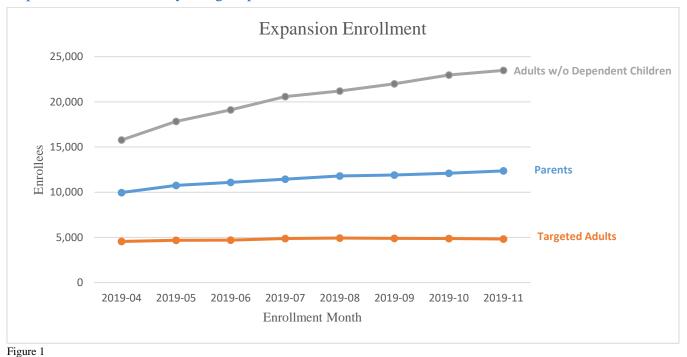
Medicaid Adult Expansion Bridge Plan Report



December 13, 2019

Expansion Enrollment by Subgroup



Expansion Enrollment

Category	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11
Adults w/o Dependent Children	15,776	17,838	19,110	20,580	21,209	22,003	22,966	23,483
Parents	9,967	10,760	11,091	11,451	11,801	11,907	12,105	12,362
Targeted Adults	4,553	4,682	4,703	4,879	4,932	4,892	4,880	4,832
Total	30,296	33,280	34,904	36,910	37,942	38,802	39,951	40,677

Table 1

Notes:

Enrollment as of December 12, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

Expansion Demographics

Last update: October 2019

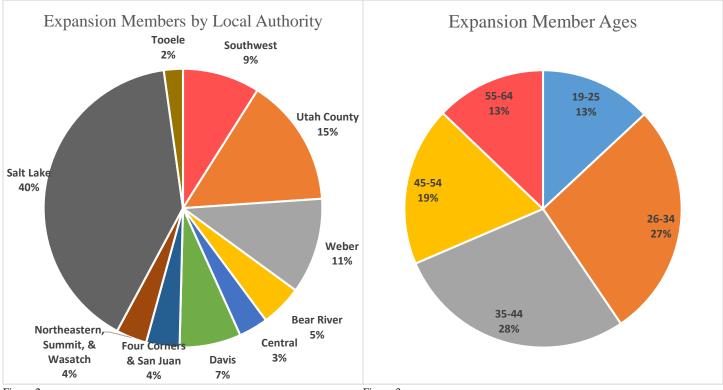


Figure 2 Figure 3

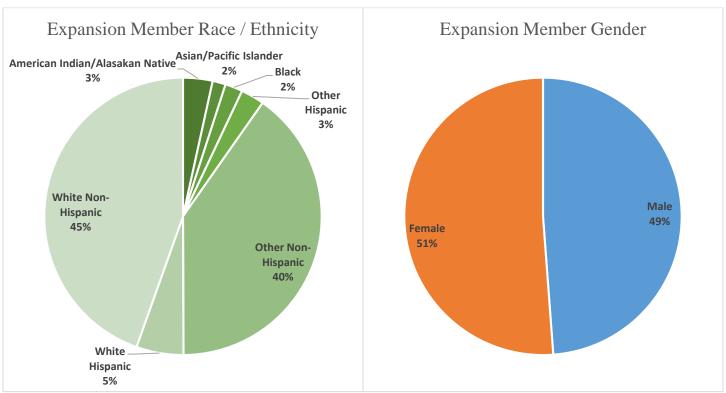


Figure 4 Figure 5

Targeted Adult Medicaid (TAM) Enrollment by Subgroup

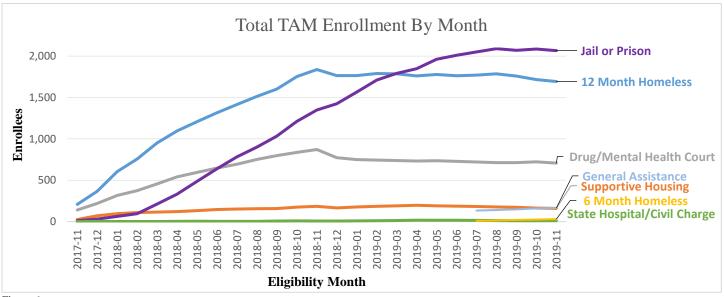


Figure 6

TAM Enrollment by Month

FY18

TAM Category	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06
Total	385	690	1,080	1,338	1,733	2,089	2,427	2,748
Table 2a	'							

FY19

TAM Category	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06
12 Month Homeless	1,415	1,513	1,603	1,754	1,838	1,764	1,764	1,789	1,786	1,761	1,779	1,762
Supportive Housing	151	155	158	174	185	165	176	184	190	197	190	186
Drug/Mental Health Crt	694	752	797	836	871	773	750	744	737	731	735	728
Jail or Prison	782	901	1,033	1,211	1,349	1,424	1,566	1,710	1,791	1,847	1,962	2,011
State Hospital/Civil Chrg	3	3	7	8	6	7	8	11	13	17	16	16
Total	3,045	3,324	3,598	3,983	4,249	4,133	4,264	4,438	4,517	4,553	4,682	4,703

Table 2b

<i>FY20</i>

TAM Category	2019-07	2019-08	2019-09	2019-10	2019-11
12 Month Homeless	1,771	1,786	1,759	1,716	1,694
Supportive Housing	182	176	172	164	159
Drug/Mental Health Crt	720	713	713	722	706
Jail or Prison	2,051	2,090	2,070	2,085	2,067
State Hospital/Civil Chrg	14	12	10	10	11
6 Month Homeless	8	14	21	24	30
General Assistance	133	141	147	159	165
Total	4,879	4,932	4,892	4,880	4,832

Table 2c

Notes:

Enrollment as of December 12, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

Targeted Adult Medicaid Reimbursements

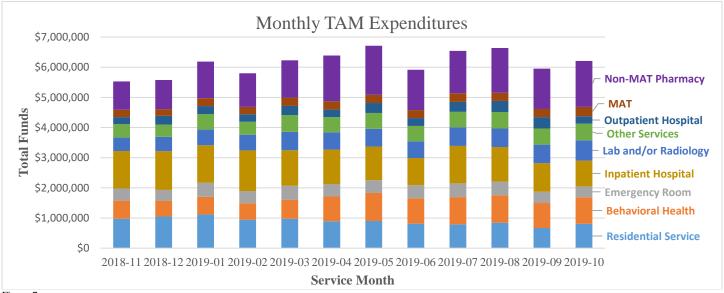


Figure 7

Monthly Expendi	tures (in	1,000s)		FY19							FY20			
Service Type	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	Total	
Residential Serv.	\$977	\$1,051	\$1,116	\$943	\$979	\$894	\$902	\$812	\$790	\$846	\$671	\$808	\$10,788	
Behavioral Health	\$601	\$515	\$590	\$551	\$630	\$822	\$930	\$846	\$902	\$908	\$826	\$881	\$9,001	
Emergency Room	\$403	\$368	\$463	\$401	\$460	\$412	\$424	\$431	\$457	\$457	\$376	\$362	\$5,014	
Inpatient Hospital	\$1,242	\$1,281	\$1,242	\$1,345	\$1,179	\$1,143	\$1,112	\$900	\$1,242	\$1,144	\$943	\$854	\$13,625	
Lab & Radiology	\$443	\$476	\$519	\$521	\$608	\$573	\$588	\$554	\$616	\$616	\$617	\$672	\$6,803	
Other Services	\$444	\$408	\$518	\$428	\$558	\$504	\$529	\$511	\$514	\$547	\$534	\$552	\$6,048	
Outpatient Hosp.	\$234	\$290	\$261	\$251	\$302	\$245	\$325	\$260	\$326	\$364	\$379	\$241	\$3,478	
MAT	\$244	\$221	\$260	\$244	\$277	\$275	\$278	\$262	\$290	\$272	\$268	\$314	\$3,206	
Non-MAT Pharm.	\$941	\$967	\$1,217	\$1,113	\$1,236	\$1,518	\$1,620	\$1,338	\$1,403	\$1,485	\$1,339	\$1,524	\$15,702	
Grand Total	\$5,530	\$5,577	\$6,186	\$5,797	\$6,230	\$6,386	\$6,709	\$5,915	\$6,539	\$6,638	\$5,952	\$6,208	\$73,666	

Table 3

Distinct Members	Served						FY19		FY20			
Service Type	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10
Residential Serv.	353	365	370	347	375	324	323	296	296	310	319	312
Behavioral Health	1,144	1,087	1,100	1,158	1,158	1,180	1,282	1,248	1,309	1,283	1,242	1,127
Emergency Room	513	469	577	493	522	528	511	557	568	573	508	516
Inpatient Hospital	101	104	118	117	104	114	107	108	111	117	94	100
Lab & Radiology	749	760	823	832	918	912	897	868	887	954	924	961
Other Services	4,122	3,978	4,095	4,254	4,364	4,438	4,558	4,581	4,720	4,800	4,780	4,759
Outpatient Hosp.	354	322	368	367	406	396	414	357	399	414	387	375
MAT	399	376	403	416	450	460	481	459	483	479	502	510
Non-MAT Pharm.	1,519	1,457	1,585	1,573	1,681	1,732	1,718	1,655	1,762	1,778	1,789	1,808
Grand Total	4,169	4,044	4,175	4,326	4,431	4,476	4,611	4,635	4,777	4,846	4,818	4,804

Table 4

- Monthly expenditures represent total fund payments to providers. Expenditures may not precisely sum up to total due to rounding.
- These total fund amounts consist of federal funds, state restricted funds, and hospital share.
- Pharmacy expenses shown here are subject to future reductions due to rebates.
- The months shown here represent the month of service, which is not necessarily the month of payment. They are subject to change with future billings and adjustments. Providers may bill up to one year after the date of service.

Expansion Parents Enrollment

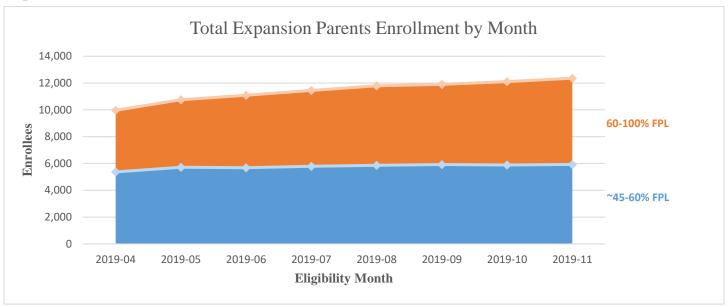


Figure 8

Expansion Parents Enrollment by Month

Category	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11
60-100% FPL	4,598	5,046	5,406	5,665	5,941	5,989	6,216	6,434
~45-60% FPL	5,369	5,714	5,685	5,786	5,860	5,918	5,889	5,928
Total	9,967	10,760	11,091	11,451	11,801	11,907	12,105	12,362

Table 5

Notes:

Enrollment as of December 12, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage

Expansion Parents Reimbursements

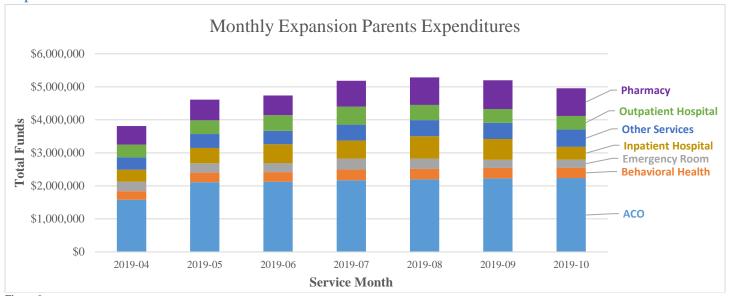


Figure 9

Monthly Expenditur	es (in thou	sands)	FY19		FY	20		T-4-1
Service Type	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	Total
ACO	\$1,580	\$2,112	\$2,126	\$2,171	\$2,199	\$2,230	\$2,236	\$14,655
Behavioral Health	\$262	\$291	\$293	\$321	\$317	\$312	\$316	\$2,112
Emergency Room	\$285	\$282	\$275	\$332	\$306	\$247	\$242	\$1,969
Inpatient Hospital	\$365	\$465	\$567	\$549	\$680	\$634	\$391	\$3,652
Other Services	\$372	\$421	\$407	\$482	\$492	\$489	\$521	\$3,184
Outpatient Hospital	\$386	\$418	\$473	\$543	\$456	\$415	\$413	\$3,105
Pharmacy	\$562	\$621	\$597	\$786	\$834	\$873	\$837	\$5,111
Grand Total	\$3,813	\$4,611	\$4,737	\$5,185	\$5,284	\$5,200	\$4,956	\$33,787

Table 6

Distinct Members Se	rved	FY19		FY20						
Service Type	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10			
ACO	3,147	4,270	4,310	4,399	4,448	4,484	4,527			
Behavioral Health	5,435	5,801	5,792	5,941	6,011	6,056	6,013			
Emergency Room	318	327	356	372	360	322	295			
Inpatient Hospital	54	54	66	61	66	57	37			
Other Services	1,461	1,490	1,511	1,628	1,668	1,737	1,843			
Outpatient Hospital	525	551	588	596	649	641	633			
Pharmacy	2,621	2,751	2,549	2,804	2,981	2,967	3,164			
Grand Total	7,130	7,711	7,713	7,991	8,238	8,290	8,457			

Table 7

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Expansion Adults without Dependent Children Enrollment

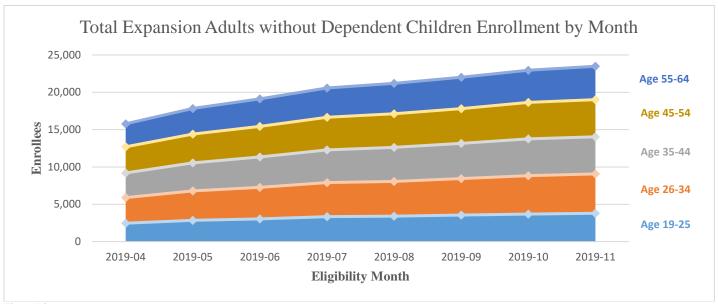


Figure 10

Expansion Adults without Dependent Children Enrollment by Month

1								
Category	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11
Age 55-64	3,074	3,443	3,669	3,934	4,087	4,186	4,321	4,465
Age 45-54	3,503	3,853	4,109	4,361	4,490	4,653	4,875	4,975
Age 35-44	3,303	3,747	4,060	4,380	4,564	4,724	4,932	4,970
Age 26-34	3,426	3,945	4,227	4,568	4,663	4,889	5,138	5,275
Age 19-25	2,470	2,850	3,045	3,337	3,405	3,551	3,700	3,798
Total	15,776	17,838	19,110	20,580	21,209	22,003	22,966	23,483

Table 8

Notes:

Enrollment as of December 12, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage

Expansion Adults without Dependent Children Reimbursements

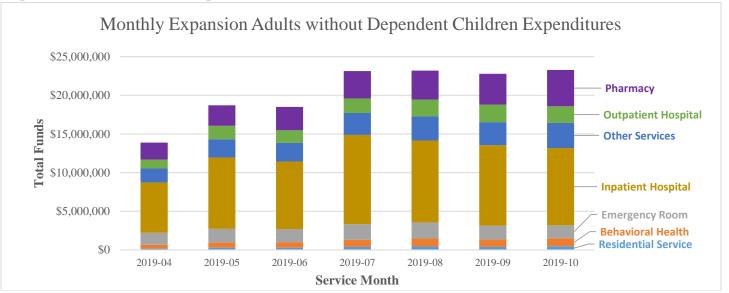


Figure 11

Monthly Expenditur	es (in thous	sands) F	Y19			Total		
Service Type	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	Total
Behavioral Health	\$499	\$673	\$739	\$913	\$1,021	\$948	\$1,018	\$5,811
Emergency Room	\$1,576	\$1,776	\$1,695	\$2,033	\$2,084	\$1,796	\$1,687	\$12,645
Inpatient Hospital	\$6,499	\$9,225	\$8,727	\$11,542	\$10,592	\$10,414	\$10,003	\$67,001
Other Services	\$1,801	\$2,373	\$2,399	\$2,824	\$3,108	\$2,981	\$3,249	\$18,735
Outpatient Hospital	\$1,156	\$1,741	\$1,630	\$1,901	\$2,180	\$2,255	\$2,148	\$13,011
Pharmacy	\$2,179	\$2,635	\$3,039	\$3,534	\$3,757	\$3,999	\$4,687	\$23,831
Residential Service	\$164	\$277	\$278	\$393	\$460	\$391	\$481	\$2,444
Grand Total	\$13,875	\$18,700	\$18,507	\$23,139	\$23,202	\$22,783	\$23,273	\$143,479

Table 9

Distinct Members Served		FY19		FY20			
Service Type	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10
Behavioral Health	1,083	1,446	1,675	1,867	2,058	2,135	2,092
Emergency Room	1,851	2,086	2,130	2,399	2,403	2,245	2,182
Inpatient Hospital	620	724	702	759	817	750	736
Other Services	14,492	16,508	17,760	19,056	19,739	20,431	21,693
Outpatient Hospital	1,537	1,999	2,026	2,284	2,501	2,456	2,658
Pharmacy	5,507	6,603	6,826	7,590	8,075	8,225	9,082
Residential Service	73	111	124	153	180	161	204
Grand Total	25,163	29,477	31,243	34,108	35,773	36,403	38,647

Table 10

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